In re Application of:

SATOSHI KUROYANA

Application No.: 09/835,444

Filed: April 17, 2001

For: COMMUNICATION DEVICE, COMMUNICATING METHOD, AND COMPUTER PROGRAM, AND STORING MEDIUM FOR AN ADDRESS BOOK

(As Amended)

Date: November 15, 2004 (Monday)

Docket No. 03560.002788.

Examiner: Hassan A. Phillips

Group Art Unit: 2151

Mail Stop Amendment THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	16	MINUS	30	= 0	x \$9 \$18	\$.00
INDEP. CLAIMS	. 6	MINUS	11	= 0	x \$44 \$88	\$.00
Fee for Multiple Dependent claims \$150°/\$300						\$.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$.00

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-

November 15, 2004 (Date of Deposit)

O'Neill, Registration No. 32,622

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If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. Verified Statement claiming small entity status is enclosed, if not filed previously. A check in the amount of \$\_\_\_\_\_ is enclosed. to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed. l xl Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed. X A check in the amount of \$110.00 to cover the fee for a one (1) month extension is enclosed. A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed. Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below. Respectfully submitted, Attorney for Applicant Michael K. O'Neill Registration No.: 32,622 FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200 Form #120

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